

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HL		7-27-01
O.I.P.E. CLASSIFIER		8	8-30
FORMALITY REVIEW	KL	1019	09-01-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 " Allowed I Interference
 (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
1	✓
2	✓
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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